

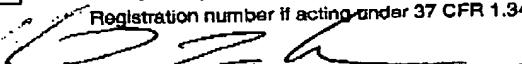
SEP 19 2005

PTO/SB/22 (12-04)

Approved for use through 7/31/2008. OMB 0651-0031

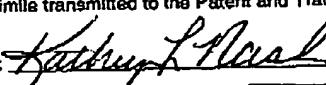
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) <b>66205-0001</b>
Application Number	10/674,622-Conf. #4195	Filed      September 30, 2003
For <b>BOTTLE RETAINER</b>		
Art Unit	3632	Examiner      J. A. Szumny
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>18-0013</u> . I have enclosed a duplicate copy of this sheet.		
I am the	<input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. Registration Number _____ <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>41,212</u>	
 Signature <u>Kristin L. Murphy</u> Typed or printed name		Date <u>September 19, 2005</u> Telephone Number <u>(248) 594-0847</u>
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of <u>1</u> forms are submitted.		

Three Month Request for Extension of Time Under 37 CFR 1.136(a)  
 I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: September 19, 2005

Signature:  (Kathryn L. Nash)

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

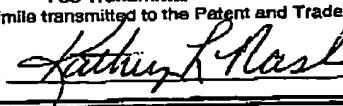
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<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>Fee Transmittal</b> <b>For FY 2005</b>		<b>Complete if Known</b> Application Number Filing Date First Named Inventor Examiner Name Art Unit Attorney Docket No.	
		10/674,822-Conf. #4195 September 30, 2003 Stephen Friend J. A. Szumny 3632 66205-0001	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b> <b>SEP 19 2005</b>	
<b>TOTAL AMOUNT OF PAYMENT</b>		(\$) 510.00	

<b>METHOD OF PAYMENT</b> (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>18-0013</u> Deposit Account Name: <u>Rader, Fishman &amp; Grauer PLLC</u>					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

<b>FEE CALCULATION</b>																												
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																												
<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>																							
	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>																					
Utility	300	150	500	250	200	100																						
Design	200	100	100	50	130	65																						
Plant	200	100	300	150	160	80																						
Reissue	300	150	500	250	600	300																						
Provisional	200	100	0	0	0	0																						
<b>RECEIVED</b> <b>OIPE/IAP</b>																												
<b>2. EXCESS CLAIM FEES</b>																												
<b>Fee Description</b> Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims																												
<b>SEP 20 2005</b>																												
<table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th colspan="3">Multiple Dependent Claims</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td><b>Fee (\$)</b></td> <td><b>Fee Paid (\$)</b></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>								Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims							<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>								
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<b>3. APPLICATION SIZE FEE</b>																												
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																												
<table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>- 100 =</td> <td>/50</td> <td>(round up to a whole number) x</td> <td></td> <td></td> </tr> <tr> <td colspan="4"></td> <td><b>Fees Paid (\$)</b></td> </tr> </tbody> </table>								Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	- 100 =	/50	(round up to a whole number) x							<b>Fees Paid (\$)</b>						
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- 100 =	/50	(round up to a whole number) x																										
				<b>Fees Paid (\$)</b>																								
<b>4. OTHER FEE(S)</b>																												
Non-English Specification, \$130 fee (no small entity discount)																												
Other (e.g., late filing surcharge): <u>2253 Extension for response within third month</u> <b>510.00</b>																												
<b>SUBMITTED BY</b> Signature:  Registration No. (Attorney/Agent) <u>41,212</u> Telephone <u>(248) 594-0647</u> Name (Print/Type): <u>Kristin L. Murphy</u> Date <u>September 19, 2005</u>																												

Fee Transmittal	
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.	
Dated: September 19, 2005	Signature:  (Kathryn L. Nash)